



STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
79 Elm Street
Hartford, CT 06106-5127

Pre-Application Questionnaire

Please respond to every question. If a particular question does not apply to your proposed project, write N/A in the response area.

Part I: General Information

Company Name:

Mailing Address:

City/Town:

State:

Zip Code:

Phone:

ext.

Fax:

Project Name:

Project Contact Person:

Part II: Site Location

Project Address (if known):

City/Town:

State:

Zip Code:

Please submit two copies of the following:

1. A site plan showing:
 - a. the project's footprint;
 - b. the location of environmentally sensitive areas, e.g., coastal resources, stream channel encroachment lines, aquifer protection zones, floodplains, wetlands, watercourses, etc.;
 - c. a notation of the scale used.
2. An 8.5" x 11" copy of the relevant portion of a United States Geological Survey topographic map with an arrow marking the location of the site.

Part III: Project Description

1. Project Type: (check every category which applies)

Residential

Commercial

Industrial

Mixed Use

New Construction

Facility Modification

Process Modification

Municipal

Other (please specify):

2. Project Schedule: Estimated Construction Start Date:
 Estimated Construction Completion Date:

3. Please provide a brief project description including: project purpose, description of the site as it exists, what changes would occur as a result of the project, and time constraints.

4. Do you have similar operations in other locations? Yes No

If yes, where?

5. What is the estimated number of post construction employees or residents at the site? (If the project represents a modification at an existing site, please indicate both the current number of employees/residents, as well as the anticipated numbers at project completion.)

6. What type and volume of vehicular traffic will the project generate?
during construction:

after construction:

Part IV: Site Preparation

1. Has a filing pursuant to CGS Sections 22a-134 through 22a-134e (transfer of hazardous waste establishments) been made for this site? Yes No

If yes, please provide details, i.e., date, transferor, transferee, etc.

2. Does the site require any environmental remediation or decontamination prior to development or occupancy? Yes No

If yes, please explain.

3. Will site preparation involve any of the following? Yes No

If yes, please check all that apply and provide details in the space below.

Building demolition

Asbestos removal

Lead paint abatement

Disturbance of land area 5 acres or larger

Part V: Construction Activities

1. Will you be constructing any pond or surface water impoundment, including those used for sedimentation, stormwater retention/detention? Yes No

If yes, will it be (check one): temporary, or permanent?

2. Will you be constructing, altering, rebuilding, or substantially repairing any dam, dike or similar structure? Yes No

If yes, please describe.

3. Will you be constructing any structures or placing any fill within a floodplain? Yes No

If yes, please describe.

4. Will any wetlands and watercourses be altered during construction? Yes No

If yes, what is the extent of the area to be altered (in acres)?

5. Will any watercourse be filled, excavated, dredged, relocated, piped, riprapped, or channelized? Yes No

If yes, please describe.

6. Will construction involve any of the following (check all that apply)?

Site dewatering

Construction of any temporary structures

Fill, dredging and/or excavation

Asphalt plant

Rock crushers, screeners or other mineral processing equipment

If yes, please describe.

Part VI: Utilities

1. What is the volume and source (e.g., existing public supply, private well, etc.) of water for each of the following?

Source

Volume (mgd)

Drinking and domestic uses:

Cooling/heating uses:

Process uses:

Irrigation:

2. If you will be utilizing a sanitary sewage disposal system, indicate method and volume (gallons per day):

Method

Volume (gpd)

Subsurface treatment and disposal system > 5000 gal/day

Community or alternative subsurface treatment and disposal system

Publicly owned treatment works

Privately owned treatment works

Other (please specify):

3. Are there any proposed interbasin transfers of water? Yes No
4. Will you be damming or diverting water for the purpose of generating power? Yes No
5. What type(s) of heating/cooling equipment will the facility use?

6. What fuel type(s) will be used in this equipment (check all that apply)?

Fuel Types

Btu/hr

Gas (specify type):

Fuel Oils (specify type):

Waste oils:

Other (specify type):

7. Will you use any emergency or standby generators? Yes No

Part VII: Operations

1. Will you generate, store, treat, transport and/ or dispose of any of the following wastes? (Check every type which applies.)

Waste Type (Statute/Regulation)	Generate	Store	Treat	Transport	Dispose
Solid Waste (CGS 22a-207)					
Recyclables					
Biomedical (RCSA 22a-209-15)					
Hazardous Waste (RCRA) (CGS 22a-449)					
Other Hazardous Waste (CGS 22a-454)					
Special Wastes (RCSA 22a-209-1)					
Low Level Radioactive (CGS 22a-163a)					
Other Wastes (specify type):					

2. Will you manufacture, possess, use, or dispose of any radioactive materials (e.g., x-ray and materials testing equipment, etc.)? Yes No

3. Will you use any other regulated materials (e.g., pesticides, imported species, etc.) at this site?
Yes No

4. Do you plan to offer for sale any regulated materials (e.g., pesticides, chemicals, etc.)?
Yes No

5. Will you store any liquid or gaseous fuels or chemicals at the site? Yes No
If yes, please describe proposed storage (e.g., above ground, underground, tank size, vapor pressure, etc.)

Part VIII: Emissions/Discharges

1. Will you be conducting any activity which will result in the emission of any pollutants and/or toxics to the air (e.g., installing fuel burning equipment, using volatile organic compounds such as inks, solvents and paints, etc.)? Yes No *If yes, please describe.*

2. Will you create any discharges of wastewater (other than domestic sewage) including but not limited to: contact and non-contact cooling water; blowdown from heating and cooling equipment; process wastewaters; rinsewaters; floor drainage; or other wastewaters? Yes No

If yes, please indicate below, listing projected daily volume and proposed discharge location (i.e., surface water, sanitary sewer, groundwater).

Wastewater Type	Volume (gal/day)	Discharge Location

Part IX: Miscellaneous Project Planning Information

1. Will the project utilize any public funds? Yes No

If yes, check type. Federal State

If there is a state agency other than the DEP involved in the project and/or managing federal funds related to this project, please list the agency, and a project contact at that agency.

2. What other permits - federal and municipal - does the project require?

3. Please describe any ancillary development associated with the site (e.g., highway improvements).

4. Please include any other information that you believe will help accurately describe the project.